# FORM D

02039433

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

RECEIVED

OMB APPROVAL

Name of Offering check if this is an amendment and name has changed, and indic	ate change.) / 0 / 5007
Filing Under (Check box(es) that apply): Rule 504 Rule 505  Type of Filing: Amendment	Rule 506 Section 4(6) ULOE
A. BASIC IDENTIFICATION	ON DATA
Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and ind	icate change.)
Address of Executive Offices (Number and Street, City, State, Zip Code)  1525 E. MARINE VIEW DR FVERET, WAS 98100	Telephone Number (Including Area Code) 425-557-3100
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business  CIVIL CONSTRUCTION	
Type of Business Organization	PHOCESSED
corporation limited partnership, already formed business trust limited partnership, to be formed	other (please specify): JUN 2 5 2002
Actual or Estimated Date of Incorporation or Organization:  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service ab  1CN for Canada; FN for other foreign	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under R	egulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the Commission (SEC) on the earlier of the date it is received by the SEC at the address given below it was mailed by United States registered or certified mail to that address.	offering. A notice is deemed filed with the U.S. Securities and Exchange or, if received at that address after the date on which it is due, on the date
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington,	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be r the manually signed copy or bear typed or printed signatures.	manually signed. Any copies not manually signed must be photocopies of
Information Required: A new filing must contain all information requested. Amendments need information requested in Part C, and any material changes from the information previously supplied:	l only report the name of the issuer and offering, any changes thereto, the in Parts A and B. Part E and the Appendix need not be filed with the SEC
Filing Fee: There is no federal filing fee.	•
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securi If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part	ULOE) for sales of securities in those states that have adopted ULOE and ties Administrator in each state where sales are to be, or have been made the proper amount shall accompany this form. This notice shall be filed in of this notice and must be completed.
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of a federal exert will not result in a loss of an available state exemption unless such exemption is properties.	

2.	Enter the information r	equested for the foll	lowing:	EE ENDISTIF	<del>f</del>	
	Each promoter of	f the issuer, if the is	suer has been organized wi	thin the past five years.		
	• Each beneficial	owner having the po	ower to vote or dispose, or d	lirect the vote or disposition	of, 10% or more of	f a class of equity securities of the issuer;
	Each executive of	officer and director	of corporate issuers and cor	porate general and managing	g partners of partne	rship issuers; and
	Each general and	i managing partner	of partnership issuers.			
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full N	lame (Last name first, i	individual)				
Busine	ess or Residence Addre	ss (Number and Stre	eet, City, State, Zip Code)			
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full N	ame (Last name first, it	individual)	·			
Busine	ess or Residence Addre	ss (Number and Stre	eet, City, State, Zip Code)			
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full N	lame (Last name first, if	individual)				
Busine	ess or Residence Addre	ss (Number and Stre	eet, City, State, Zip Code)			
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full N	ame (Last name first, if	individual)				
Busine	ess or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)			
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full N	ame (Last name first, if	individual)				
Busine	ess or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)			
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full N	ame (Last name first, if	individual)				
Busine	ess or Residence Addres	ss (Number and Stre	et, City, State, Zip Code)			
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full N	ame (Last name first, if	individual)				
Busine	ess or Residence Addres	s (Number and Stre	et, City, State, Zip Code)			
		() le	e blank sheet or conv and i	ise additional conies of this	sheet as necessary	)

A. BASIC IDENTIFICATION DATA

#### Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years. Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Beneficial Owner **Executive Officer** Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA CON'T.

3 of 9

			·		B. INFOR	MATION ABO	OUT OFFER	NG			···	
1. I	Has the issue	r sold, or doe	s the issuer in	itend to sell, to	non-accredite	d investors in t	his offering? .					Yes No
				Ans	wer also in app	endix, Colum	ı 2, if filing un	der ULOE.				. — —
2.	What is the n	ninimum inve	stment that w	vill be accepted	d from any indi	vidual						s <u>I,000</u> .00
3. [	Does the offe	ring permit jo	oint ownershi	p of a single u	nit?							···· Pes No
s	olicitation of egistered with	purchasers in the SEC and	connection will./or with a sta	rith sales of sec te or states, list	s been or will b turities in the of t the name of th mation for that	fering. If a per e broker or dea	son to be listed ler. If more th	is an associ	ated person	or agent of a	broker or de	ealer
Full Na	ıme (Last naı	me first, if inc	lividual)		4	1-15				<u> </u>		
Busine	ss or Resider	nce Address ()	Number and	Street City St	ate, Zip Code)	lore						
Dusine	as of resider	ice Address (i		succi, City, St	ate, zip code)							
Name o	of Associated	Broker or Do	ealer						···			
States i	n Which Per	son Listed Ha	s Solicited o	r Intends to So	licit Purchaser	<u> </u>		<u> </u>				***
(	Check "All S	states" or chec	ck individual	States)								. All States
[AL] [IL] [MT] [RI]	(AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) (MI) (OH) (WV)	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
	<del></del>	ne first, if ind			( <u>1</u>	<u> </u>						
Busines	s or Residen	ce Address ()	Number and S	Street City St	ate, Zip Code)					<del></del>	····	
Dasine	ss of Residen	ice Address (i	Turriber and t		ale, Zip Code)							
Name o	of Associated	Broker or De	ealer		· ·							
States i	n Which Per	son Listed Ha	s Solicited or	r Intends to So	licit Purchasers	3	=-=					
	(Check "A	All States" or	check indivi	dual States)								. All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] .[WY]	[ID] [MO] [PA] [PR]
Full Na	me (Last nar	me first, if ind	ividual)	<u>.</u>				<del></del>			<u>-</u>	
Busines	ss or Residen	ce Address (1	Number and S	Street, City, Sta	ate, Zip Code)						<del> </del>	
Name o	of Associated	Broker or De	ealer									
States i	n Which Pers	son Listed Ha	s Solicited or	Intends to So	licit Purchasers	<u>-</u>	· <u>·····</u>		<del></del> -			
	(Check "A	All States" or	check individ	iual States)								. All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ \$	\$ \$
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	<u>\$</u>	\$
	Other (Specify)	\$	\$
	Total	\$	S
	Answer also in Appendix, Column 3, if filing under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
			Aggregate
		Number Investors	Dollar Amount of Purchases
			_
	Accredited Investors  Non-accredited Investors		\$ \$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify set by type listed in Part C - Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505 Regulation A		\$
	Rule 504		\$ \$
			·
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this of Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate and the left of th	future	
	Transfer Agent's Fees		7 s
	Printing and Engraving Costs	<u></u>	1 S
	Legal Fees		s/0.000
	Accounting Fees	~	1 s
	Engineering Fees		] S
	Sales Commissions (specify finders' fees separately)		1 s
	Other Expenses (identify)		] S
	Total		\$0.000
		IZ.:	u

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

(9/97)

		RICE, NUMBER OF INVESTORS, EXI	ENSES AND USE U	F PROCEEDS	
	b. Enter the difference between the aggregate	offering price given in response to Part C	- Question 1 and total	<u> </u>	
	expenses furnished in response to Part C - Question				
1	proceeds to the issuer."		• • • • • • • • • • • • • • • • • • • •		· · · · · \$
	Indicate below the amount of the adjusted gross p	• •			
	purposes shown. If the amount for any purpose is r estimate. The total of the payments listed must eq				
	to Part C - Question 4.b above.	ual the adjusted gross proceeds to the issue	er set fortit in response	•	
	to Fair C - Question 4.0 above.				
				Payments to	
				Officers,	
				Directors, &	Payments 7
				Affiliates	Others
	Colonias and Care				
	Salaries and fees			<del></del>	s
	Purchase of real estate			<del></del>	
	Purchase, rental or leasing and installation of mac Construction or leasing of plant buildings and fac		<del></del>		\$
	Construction of leasing of plant buildings and fac Acquisition of other business (including the value			<del></del>	
1	may be used in exchange for the assets or securiti-	es of another issuer			
	pursuant to a merger)				\$
	Repayment of Indebtedness		<u></u>	<del>,</del> _	<u> </u>
	Working Capital				<u> </u>
(	Other (specify):		\$.		\$
-					—
-					<u> </u>
	Column Totals				\$
	Total Payments Listed (column totals added)			L \$	
		D. FEDERAL SIGNATU	RE		
7h.a. i.e.	anna haa dulu aannad shia masiaa sa ha airmad ku si	ha undanimad duly outhorized names. If	this notice is filed une	los Dula 505 the faller	
	suer has duly caused this notice to be signed by that taking by the issuer to furnish to the U.S. Securiti				
	lited investor pursuant to paragraph (b)(2) of Rule	•	in request of its starr,	mo momentum	ica by the issaer to any
	er (Print or Type)	Signature	Date		
Issue					
_	hinse Consorvery Commen	1/1/1/1/2/	• /	14 14 200	
W	hase Constructor Company	Willer tagle		MAY 14, 200	
u	he of Signer (Printer or Type)	Title of Signer (Print or Type)			
Nam		Title of Signer (Print or Type)  VICE PRESIDENT- FINA			

D.	STATE	<b>SIGNAT</b>	URE
----	-------	---------------	-----

Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions
of such rule?



See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) WILDER CONSTRUCTION COMPANS	Signature Della Carlo	Date MAY 14, 2007
Name of Signer (Printer or Type)  WILLIAM C. TAYLOR	Title of Signer (Print or Type)  VICE PRESIDENT - FINANCE AM	o ADMINISTRATION

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

1		2	3			3			5	
	to non-a investor	I to sell ccredited s in State -Item 1)	Type of Security and aggregate offering price offered in state (Part C - Item 1)		Type of investor and amount purchased in State (Part C - Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E - Item 1)	
			COMMAN STAK \$ 1050/SHAPEC	Number of Accredited		Number of Non-Accredited				
State	Yes	No	\$ 1050/SHARE	Investors	Amount	Investors	Amount	Yes	No	
AL			<b>70.0</b>			<b>1</b>	6 -			
AK	X		8913,00c	<u> </u>		4	8 147,000		X	
AZ										
AR										
CA										
СО										
C5							<u></u>			
DE										
DC										
FL GA								<u> </u>		
HI										
ID		<u> </u>								
IL										
IN						<del></del>				
IA										
KS				<u> </u>						
KY										
LA										
ME										
MD										
MA										
MI										
MN										
MS										
МО										

8 of 9 (9/97)

1		2	3		****	3			5
	to non-a	to sell ccredited s in State -Item 1)	Type of Security and aggregate offering price offered in state (Part C - Item 1)		Type of investor and amount purchased in State (Part C - Item 2)				ification ate ULOE , attach ation of granted) - Item 1)
State	Yes	No	COMMON SLACK FLUS-/SHACE	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT									
NE									
NV									
NH									
NJ									-
NM									
NY							i		
NC									
ND									
ОН		-							
OK									
OR								•	
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									_
VA									
WA	×		\$2,604,000	Ð	^	6	1304,00	- 15	×
WV				· · · · · ·			7	-	
WI									
WY									
PR									

### **EXHIBIT A**

# Wilder Construction Company

# List of 10% Owners, Executive Officers and Directors

Name	Address	10% Owner	Executive Officer	Director	
Barton, William E.	585 West Beach Street P. O. Box 50085 Watsonville, CA 95077-5085	*		X	
Boitano, Mark	585 West Beach Street P. O. Box 50085 Watsonville, CA 95077-5085	*		Х	
Dickhaus, David N.	11301 Lang Street Anchorage, AK 99515			X	
Dorey, William G.	585 West Beach Street P. O. Box 50085 Watsonville, CA 95077-5085	*		X	
Helsell, Robert M.	1525 E. Marine View Drive Everett, WA 98201-1927			Х	
March, Donald M.	1525 E. Marine View Drive Everett, WA 98201-1927		X	X	

<sup>\*</sup> These Directors disclaim beneficial ownership of any shares of the issuer owned by their employer, Granite Construction Company.